

APPLICATION FOR CALLER ID/CALLER ID RESTRICTION

APPLICATION REQUIREMENTS

Attach the following documents to this application form	Pensioner	Residential	Business
Copy of ID or Passport document	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Copy of Pension Card	<input type="radio"/>		
Copy of Marriage certificate*	<input type="radio"/>	<input type="radio"/>	
Copy of Business/ company Registration Certificate			<input type="radio"/>

1. Personal Details

Title The Hon Prof Miss Mr Dr Rev Other (please specify)

Surname _____ Full name(s) _____

Date of Birth Day/Month/Year _____ Occupation _____

Identity/Passport number _____ Citizenship _____

Postal Address _____ Post Office _____ Town _____

Contact details Telephone number Home _____ Office _____ Cell _____

Fax _____ E-mail _____

Marital Status Married in community of property Married in community of property

Married out of community with prenuptial contract _____ Widow Divorced Single

Spouse name _____ Spouse Identity/Passport number _____

Next of kin/Friend name _____

Contact number _____

2. Service Required

(Tick applicable one)

Caller ID Activation Caller ID Deactivation

Caller ID Restriction Activation Caller ID Restriction Deactivation

3. Terms and Conditions

Normal Terms and Conditions still apply!

4. Payment Undertaking (personal)

I/We _____ the undersigned,

1. Declare that the information provided in this application and copies of attachments are true and correct.
2. Understand that the telephone service required will be subject to the "Post and Telecommunications Act, 19 of 1992".
3. Do hereby accept and agree to the terms and conditions of the contract.

Signature _____ Date _____ / _____ / _____

Spouse/Legal Guardian Name _____ Surname _____

Signature (Spouse*) / Legal Guardian _____ Date _____ / _____ / _____

**Marriage in Community of property / Power of Attorney Signature is required.*

Signature _____ Date _____ / _____ / _____

5. PAYMENT UNDERTAKING (BUSINESS)

I/We _____ the undersigned, in my capacity as _____ of the business and in my personal capacity

1. Hereby warrant / agree that I am duly authorized by the applicant to make this application on his / her behalf and that the above information and copies of attachments are true and correct.
4. Do hereby on behalf of the applicant accept and agree to the terms and conditions of the contract.
5. Do hereby acknowledge and agree that by my signature hereto I bind myself in accordance with the terms and conditions, as surety and co-principal debtor in solidum with the applicant in favour of Telecom Namibia Limited for the due payment by the applicant of all amounts which may now or at any time hereafter become payable by the applicant to Telecom Namibia Limited.
1. Understand that the telephone service required will be subject to the "Post and Telecommunications Act, 19 of 1992".

Signature _____ Date _____ / _____ / _____

Signature (Spouse*) / Legal Guardian _____ Date _____ / _____ / _____

**Marriage in Community of property / Power of Attorney Signature is required.*

Signature _____ Date _____ / _____ / _____

Note: Declaration Form of Joint and Several Liability for Business Customers to accompany this application.

TELECOM NAMIBIA USE ONLY

Total solutions		Full house		Multi Services	
High Flyers	<input type="radio"/>	One liners	<input type="radio"/>	Let's talk	<input type="radio"/>
Customer Relationship Manager	<input type="radio"/>	Sales Team	<input type="radio"/>	Teleshop	<input type="radio"/>
All legal documents attached	<input type="radio"/>	ITC Approved	<input type="radio"/>		
Checked customer history records	<input type="radio"/>	Security deposit collected		<input type="radio"/>	

Signature Supervisor/ Manager: _____

Date: _____

Contact number: _____ Service order number: _____

Agent's Name: _____ Signature: _____

Date:
